FORCE FITNESS INSTRUCTOR COURSE (FFIC) 3-17 COMMAND SCREENING CHECKLIST NAME: RANK: UNIT: EDIPI: PREREQUISITES COMMENTS YES NO 1. Appropriate Grade, Staff Sergeant and above. 2. Minimum 1 year obligated service upon completion of course. $\hfill\Box$ YES $\hfill\Box$ NO \square yes \square no 3. Are there any existing family or financial hardships that would preclude this individual from attending this course? YES NO 4. Possesses Appropriate uniform and equipment for the course. Gear list https://vce.tecom.usmc.mil/sites/trngcmd/tbs/tbsmace ☐ YES ☐ NO 5. Physically capable of a 1st Class PFT and CFT Certified by: Date/Score of PFT: Date/Score of CFT: YES NO 6. Meets height/weight standards per MCO 6100.13_ Date of Weigh-in: Ht: WT: BF% (if applicable): YES NO Medical provider name: Date of physical: Medical provider billet: Medical provider signature: Note: Must be signed and stamped by a medical officer, civilian health provider, Nurse practitioner, or ${\tt IDC.}$ Command Recommendations I certify that that SNM possesses the required attributes listed in paragraph 8 of MarAdmin 114/17 and that all information contained on this checklist is accurate. SERGEANT MAJOR Name Signature Date COMMANDING OFFICER Name Signature Date 20170306 (FOR USE FOR FFIC 3-17 ONLY)